

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	J.B.	XDXE	1-20-00
O.I.P.E. CLASSIFIER		10	1-20-00
FORMALITY REVIEW		71551	1-29-00
RESPONSE FORMALITY REVIEW			1

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) ... Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	✓	✓	1-20-00
2	✓	✓	1-20-00
3	✓	✓	1-20-00
4	✓	✓	1-20-00
5	✓	✓	1-20-00
6	✓	✓	1-20-00
7	✓	✓	1-20-00
8	✓	✓	1-20-00
9	✓	✓	1-20-00
10	✓	✓	1-20-00
11	✓	✓	1-20-00
12	✓	✓	1-20-00
13	✓	✓	1-20-00
14	✓	✓	1-20-00
15	✓	✓	1-20-00
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18	✓	✓	1-20-00
19	✓	✓	1-20-00
20	✓	✓	1-20-00
21	✓	✓	1-20-00
22	✓	✓	1-20-00
23	✓	✓	1-20-00
24	✓	✓	1-20-00
25	✓		
26	✓	✓	1-20-00
27	✓	✓	1-20-00
28	✓	✓	1-20-00
29	✓	✓	1-20-00
30	✓	✓	1-20-00
31	✓	✓	1-20-00
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If more than 150 claims or 10 actions  
staple additional sheet here